Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	Al	bout Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Stephanie First name Michelle Middle name Deaton Last name and Suffix (Sr., Jr., II, III)	Mi	rst name iddle name ast name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1952		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 2 of 53

Debtor 1 Stephanie Michelle Deaton

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s) EINs
		EINS	EINS
5.	Where you live	860 Walnut Street, Apt. 1	If Debtor 2 lives at a different address:
		Milford, OH 45150 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Clermont County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main

Page 3 of 53 Document Debtor 1 Stephanie Michelle Deaton Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12.

Has your landlord obtained an eviction judgment against you?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

No. Go to line 12.

this bankruptcy petition.

residence?

No.

☐ Yes.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 4 of 53

Case number (if known) Debtor 1 Stephanie Michelle Deaton Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property?

Number, Street, City, State & Zip Code

or a building that needs urgent repairs?

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 5 of 53

Debtor 1 Stephanie Michelle Deaton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 6 of 53

Deb	Stephanie wichen	e Dealon			(II KIIOWII)				
Part	6: Answer These Questi	ons for Re	porting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c. -	State the type of debts you owe the	nat are not consumer debts or business	debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.					
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000				
		□ 100-19 □ 200-99		☐ 10,001-25,000	☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
Part	7: Sign Below	— \$300,0	OT - \$1 Hillion						
	you	I have exa	mined this petition, and I declare	under penalty of perjury that the informa	ation provided is true and correct.				
				n aware that I may proceed, if eligible, u available under each chapter, and I cho					
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571.								
		Stephan	nanie Michelle Deaton ie Michelle Deaton of Debtor 1	Signature of Debtor 2	2				
		Executed	on November 25, 2019 MM / DD / YYYY	Executed on MM /	DD / YYYY				

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 7 of 53

Debtor 1 Stephanie Michelle Deaton Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Eric A. Steiden, Esq. OH:	Date	November 25, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Eric A. Steiden, Esq. OH: 0063978 KY: 88321		
Printed name		
Steiden Law Offices		
Firm name		
411 Madison Avenue		
Covington, KY 41011		
Number, Street, City, State & ZIP Code		
Contact phone (513) 888-8888	Email address	esteiden@steidenlaw.com
OH: 0063978 KY: 88321 OH		
Bar number & State		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 8 of 53

		Docume	ent Page 8 of 53		
Fill i	n this information to identify yo	ur case:			
Debt		nelle Deaton			
Debt	First Name	Middle Name	Last Name		
	se if, filing) First Name	Middle Name	Last Name		
Unite	d States Bankruptcy Court for the	SOUTHERN DISTRICT	OF OHIO		
(if kno	wn)				cif this is an ded filing
Off	cial Form 106Sum				
		s and Liabilities an	d Certain Statistical Information	,	12/15
infori	nation. Fill out all of your sched original forms, you must fill out	lules first; then complete th	are filing together, both are equally responsible for e information on this form. If you are filing amend the box at the top of this page.		
				Your a	ssets
					of what you own
1.	Schedule A/B: Property (Official	Form 106A/B)		¢	0.00
				\$	
	1b. Copy line 62, Total personal p	property, from Schedule A/B		\$	2,719.70
	1c. Copy line 63, Total of all propo	erty on Schedule A/B		\$	2,719.70
Part	2: Summarize Your Liabilities	S			
					abilities t you owe
	Schedule D: Creditors Who Have 2a. Copy the total you listed in Co		(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	0.00
	Schedule E/F: Creditors Who Hav 3a. Copy the total claims from Pa		Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Pa	art 2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	55,697.40
			Your total liabilities	\$	55,697.40
Part	3: Summarize Your Income a	nd Expenses			
4.	Schedule I: Your Income (Official Copy your combined monthly income		<i>I</i>	\$	2,781.42
	Schedule J: Your Expenses (Office Copy your monthly expenses from			\$	2,853.67
Part	4: Answer These Questions f	or Administrative and Stati	stical Records		
6.	Are you filing for bankruptcy un No. You have nothing to rep	•	neck this box and submit this form to the court with yo	ur other scł	nedules.
7.	■ Yes What kind of debt do you have?	?			
	■ Your debts are primarily co	onsumer debts. Consumer o	lebts are those "incurred by an individual primarily for	a personal.	family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 9 of 53

Debtor 1 Stephanie Michelle Deaton

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,011.40

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	15,373.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	15,373.00

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 10 of 53

		Document	t Page 10 of 53		
Fill in this infor	mation to identify yo	ur case and this filing:			
Debtor 1	Stephanie Mich	nelle Deaton			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the	SOUTHERN DISTRICT OF	OHIO		
Case number					Check if this is an
					amended filing
Official Fo	rm 106A/B				
_		norty			
	e A/B: Pro	<u>. </u>			12/15
hink it fits best. E	Be as complete and accore space is needed, atta	urate as possible. If two married p	e. If an asset fits in more than one category, beople are filing together, both are equally re On the top of any additional pages, write you	sponsible for supply	ying correct
Part 1: Describe	Each Residence, Build	ing, Land, or Other Real Estate Y	ou Own or Have an Interest In		
1. Do you own or	have any legal or equita	ble interest in any residence, bui	lding, land, or similar property?		
No. Go to Pa	rt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
someone else dri	ves. If you lease a veh		eles, whether they are registered or not G: Executory Contracts and Unexpired Le		les you own that
_					
■ No					
☐ Yes					
Examples: Boa			vehicles, other vehicles, and accessorels, snowmobiles, motorcycle accessories	ies	
■ No □ Yes					
□ Tes					
			ies from Part 2, including any entries fo		\$0.00
				<u> </u>	
	Your Personal and Ho	usehold Items uitable interest in any of the f	ollowing items?	Cur	rent value of the
Do you own or	nave any legal of equ	and the rest in any or the r	onowing items:	port Do r	tion you own? not deduct secured ms or exemptions.
	oods and furnishings ajor appliances, furnitu	s ire, linens, china, kitchenware			,
Yes. Desc	ribe				
	l			1	
	table, la		and chairs, couch, loveseat, end inment stand, bed, nightstand, lamps, misc.		\$1,100.00

Official Form 106A/B Schedule A/B: Property page 1

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 11 of 53

Debtor 1	Stephanie Michelle Deaton Case number (if known	n)
	TV commutes	\$400.00
	TV, computer	\$400.00
■ No	 nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games Describe 	collections; electronic devices
-	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, co other collections, memorabilia, collectibles	n, or baseball card collections;
	Describe	
Examp. No	ent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments Describe	s and kayaks; carpentry tools;
■ No	ns ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
□ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Clothing	\$200.00
□ No	bles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems Describe	
	Misc. jewelry	\$300.00
<i>Exam</i> □ No	prescribe	
	Cat	\$0.00
No Yes.	her personal and household items you did not already list, including any health aids you did not list Give specific information the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$2,000.00
	wn or have any legal or equitable interest in any of the following?	Current value of the
		portion you own? Do not deduct secured

claims or exemptions.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 12 of 53

Debtor 1	Stephanie Michelle Deaton		Case number (if known)	
☐ No	aples: Money you have in your wallet,	in your home, in a safe deposit box, an	d on hand when you file your petition	
— 100.			Cash on hand	\$35.00
Exam		ancial accounts; certificates of deposit; se accounts with the same institution, list Institution name:	shares in credit unions, brokerage houses, ar each.	nd other similar
. 55.	17.1. Checki	ng First Service Fede	ral Credit Union	\$370.82
	17.2. Saving	s First Service Fede	ral Credit Union	\$5.00
Exam ■ No	,	stocks tts with brokerage firms, money market or issuer name:	accounts	
19. Non-p joint			businesses, including an interest in an LL	.C, partnership, and
Nego Non-r ■ No	tiable instruments include personal classified instruments are those you are specific information about them	ther negotiable and non-negotiable in necks, cashiers' checks, promissory not cannot transfer to someone by signing	tes, and money orders.	
	Issuer name: ment or pension accounts aples: Interests in IRA, ERISA, Keogh	, 401(k), 403(b), thrift savings accounts	s, or other pension or profit-sharing plans	
■ Yes.	. List each account separately. Type of account	: Institution name:		
	403(b)	Fidelity		\$162.88
	401K	Humana		\$146.00
Your : Exam		e made so that you may continue servic paid rent, public utilities (electric, gas, v	ce or use from a company vater), telecommunications companies, or oth	ners
■ No □ Yes.		Institution name or ind	lividual:	
■ No	ities (A contract for a periodic payme	nt of money to you, either for life or for a cription.	a number of years)	
	sts in an education IRA, in an acco .C. §§ 530(b)(1), 529A(b), and 529(b		under a qualified state tuition program.	
■ No Official For	rm 106A/B	Schedule A/B: Property		page 3

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Document Page 13 of 53 Case number (if known) Debtor 1 **Stephanie Michelle Deaton** Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information..

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 14 of 53

	Document	Page 14 of	53	
Debtor 1	Stephanie Michelle Deaton		Case number (if known)	
	d the dollar value of all of your entries from Part 4, including Part 4. Write that number here		es you have attached	\$719.70
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ite in Part 1.	
37. Do yo	u own or have any legal or equitable interest in any business-relate	ed property?		
■ No.	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You f you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
`	ou own or have any legal or equitable interest in any farm-	or commercial fishir	g-related property?	
■ N	lo. Go to Part 7.			
ПΥ	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	ou have other property of any kind you did not already list? mples: Season tickets, country club membership	•		
■ No				
☐ Ye	s. Give specific information			
54. Ad	d the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Par	t 1: Total real estate, line 2			\$0.00
56. Par	t 2: Total vehicles, line 5	\$0.00		
57. Par	t 3: Total personal and household items, line 15	\$2,000.00		
58. Par	t 4: Total financial assets, line 36	\$719.70		
59. Par	t 5: Total business-related property, line 45	\$0.00		
60. Par	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Par	t 7: Total other property not listed, line 54 +	\$0.00		
62. Tot	al personal property. Add lines 56 through 61	\$2,719.70	Copy personal property to	tal \$2,719.70
			_	

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,719.70

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 15 of 53

Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Stephanie Michel	le Deaton					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO				
Case number _							
(if known)					Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.					
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)					
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption	you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each	ch exemption.		
	Washer and dryer, kitchen table and	\$1 100 00	_	\$1 100 00	Ohio Rev. Code Ann. §	

Washer and dryer, kitchen table and chairs, couch, loveseat, end table, lamps, coffee table, entertainment stand, bed, nightstand, dresser, kitchenware and dishes, lamps, misc.

Line from Schedule A/B: 6.1

\$1,100.00

\$1,100.00

100% of fair market value, up to any applicable statutory limit

Ohio Rev. Code 2329.66(A)(4)(a)

\$400.00

\$200.00

\$300.00

\$400.00

100% of fair market value, up to any applicable statutory limit

\$200.00

100% of fair market value, up to any applicable statutory limit

\$200.00

100% of fair market value, up to any applicable statutory limit

\$300.00

100% of fair market value, up to any applicable statutory limit

\$300.00

100% of fair market value, up to

any applicable statutory limit

Official Form 106C

TV, computer

Clothing

Misc. jewelry

Line from Schedule A/B: 6.2

Line from Schedule A/B: 11.1

Line from Schedule A/B: 12.1

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 16 of 53

Debtor	Stephanie Michelle Deaton			Case number (if known)	
	ief description of the property and line on thedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
-	ash on hand ne from <i>Schedule A/B</i> : 16.1	\$35.00	\$35.00 \$		Ohio Rev. Code Ann. § 2329.66(A)(3)
LII	ie IIIIII Schedule A/B. 10.1		100% of fair market value, up to any applicable statutory limit	2323.00(A)(3)	
	hecking: First Service Federal redit Union	\$370.82		\$370.82	Ohio Rev. Code Ann. § 2329.66(A)(18)
-	ne from <i>Schedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	2020.00(1)(10)
	avings: First Service Federal Credit	\$5.00		\$5.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
-	ne from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
	03(b): Fidelity	\$162.88		\$162.88	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)
LII	ie IIIII Schedule A/B. 21-1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(10)(c)
	01K: Humana ne from <i>Schedule A/B</i> : 21.2	\$146.00	•	\$146.00	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)
	ic from Generalic AVB. 2112			100% of fair market value, up to any applicable statutory limit	2020:00(1:)(10)(0)
	re you claiming a homestead exemption ubject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
	No				
	Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No	•		•	
	☐ Yes				

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 17 of 53

Fill in this information to identify your case:					
Debtor 1	Stephanie Michel				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 18 of 53

		Document	Page 18	3 of 53		
Fill in this	information to identify your	case:				
Debtor 1	Stephanie Michell	le Deaton				
Debioi i	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filin	ng) First Name	Middle Name	Last Name			
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRICT OF O	HIO			
Case numb	per				Charletthia is an	
(II KHOWH)					Check if this is an amended filing	
					amended ming	
Official	Form 106E/F					
Schedu	le E/F: Creditors W	ho Have Unsecured	Claims		12/15	
Schedule G: Schedule D: left. Attach ti name and ca	Executory Contracts and Unexp Creditors Who Have Claims Secondary the Continuation Page to this pages ase number (if known).	that could result in a claim. Also lired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re	Do not include needed, copy t	any creditors with partially secure the Part you need, fill it out, numb	ed claims that are listed in per the entries in the boxes on the	
	List All of Your PRIORITY Un					
_ ′	creditors have priority unsecure	a ciaims against you?				
	Go to Part 2.					
☐ Yes.						
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any	creditors have nonpriority unsec	cured claims against you?				
_ `		art. Submit this form to the court with	vour other ash	adulaa		
□ 1NO.	rou have nothing to report in this pa	art. Submit this form to the court with	i your officer scrie	edules.		
Yes.						
unsecur	ed claim, list the creditor separately	aims in the alphabetical order of the for each claim. For each claim lister is the other creditors in Part 3.lf you	d, identify what t	ype of claim it is. Do not list claims a	already included in Part 1. If more	
					Total claim	
				Multiple		
	celerated Creditors Serv.	Last 4 digits of acc	count number	Accounts	\$152.35	
	npriority Creditor's Name 079 Springfield Pike	When was the deb	t incurred?	2019		
	ncinnati, OH 45215-1454	When was the deb	t illourreu :	2019		
	mber Street City State Zip Code	As of the date you	file, the claim i	s: Check all that apply		
Wh	o incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
☐ Debtor 2 only ☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only ☐ Disputed						
	At least one of the debtors and and	other Type of NONPRIOR	RITY unsecured	d claim:		
	Check if this claim is for a comm	nunity				
del	ot	☐ Obligations arisi		ration agreement or divorce that you	u did not	
_	he claim subject to offset?	report as priority cla				
	No			g plans, and other similar debts		
	Yes	Other. Specify	Medical Co	llections		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 19 of 53

Debt	Stephanie Michelle Deaton		Case number (if known)		
4.2	AD Astra Recovery Services, Inc.		\$125.40		
	Nonpriority Creditor's Name 7330 W 33rd Street N Suite 118	When was the debt incurred?	2019		
	Wichita, KS 67205 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	·		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Collection	account		
			Multiple	* 4.50.00	
4.3	Cincinnati Children's Hospital Nonpriority Creditor's Name	Last 4 digits of account number	accounts	\$150.00	
	PO Box 5209 Cincinnati, OH 45201-5209	When was the debt incurred?	2018		
	Number Street City State Zip Code	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.			
	<u> </u>				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.		
	At least one of the debtors and another	Student loans	d Claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Medical Se	- ·		
4.4	Credit Collection Services Nonpriority Creditor's Name	Last 4 digits of account number		\$120.46	
	725 Canton Street Norwood, MA 02062	When was the debt incurred?	2019		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	3		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	■ Other, Specify Collection	account		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 20 of 53

Stephanie Michelle Deaton		Case number (if known)	
Department of Education/Notice		Multiple	¢4 € 272.00
Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	accounts	\$15,373.00
121 S 13th Street Lincoln, NE 68508	When was the debt incurred?	2011-2018	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Federal Stu	dent Loans	
ERC	Last 4 digits of account number	3378	\$624.85
Nonpriority Creditor's Name PO Box 57610	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.		or onest an inat apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Collection a	account	
Fabco	Last 4 digits of account number		\$1,271.08
Nonpriority Creditor's Name PO Box 20850	When was the debt incurred?	2019	
Columbus, OH 43220	mon was the dest mounted.	2013	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	□ Debts to pension or profit-sharing	a plane, and other similar debts	
Yes	Other. Specify Collection a	account	

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 21 of 53

Stephanie Michelle Deaton

Case number (if known)

Debt	or 1 Stephanie Michelle Deaton		Case number (if known)	
4.8	Key Bridge	Last 4 digits of account number	Multiple accounts	\$458.36
	Nonpriority Creditor's Name 2348 Baton Rouge Avenue PO Box 1568 Lima, OH 45805	When was the debt incurred?	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	At least one of the debtors and another	Student loans	a Ciaiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical Co		
			Multiple	
4.9	Mercy Health	Last 4 digits of account number	Accounts	\$241.32
	Nonpriority Creditor's Name PO box 635963 Cincinnati, OH 45263	When was the debt incurred?	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical Se	rvices	
4.1 0	Nissan Motor Acceptance Corporation	Last 4 digits of account number	0001	\$18,422.58
	Nonpriority Creditor's Name PO Box 660360 Dallas, TX 75266	When was the debt incurred?	7-2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Automobile	Repossession	

Official Form 106 E/F

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 22 of 53

Stephanie Michelle Deaton

Case number (if known)

Deb	Stephanie Michelle Deaton	Case number (if known)	
4.1 1	OneMain Financial	Last 4 digits of account number 4953	\$9,894.00
	Nonpriority Creditor's Name PO Box 64	When was the debt incurred? 2017	
	Evansville, IN 47701 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Signature Loan	
4.1 2	Parson Bishop	Last 4 digits of account number	\$142.00
<u>-</u>	Nonpriority Creditor's Name 7870 Camargo Rd Cincinnati, OH 45243	When was the debt incurred? 2015	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection account	
4.1 3	Plaza Services	Last 4 digits of account number	\$1,080.00
<u> </u>	Nonpriority Creditor's Name 110 Hammond Drive	When was the debt incurred? 2018	
	Atlanta, GA 30328 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify Collection account	

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 23 of 53

Republic Bank and Trust	Last 4 digits of account number	;	
Nonpriority Creditor's Name PO Box 701211	When was the debt incurred? 2019		
Louisville, KY 40270 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
□ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Credit-card purchases		
Safe FCU Visa	Last 4 digits of account number	\$7	
Nonpriority Creditor's Name			
PO Box 2008 Sumter, SC 29151	When was the debt incurred? 1994-2013		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	■ Other. Specify Credit-card purchases		
The Receivable Management			
Services LLC Nonpriority Creditor's Name	Last 4 digits of account number		
240 Emery Street Bethlehem, PA 18015	When was the debt incurred? 2019		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
s the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing plans, and other similar debts		

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 24 of 53

Debtor 1 Stephanie Michelle Deaton		Case number (if known)
Accelerated Creditors Services, Inc. 10079 Springfield Pike PO Box 40304	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Cincinnati, OH 45215	Last 4 digits of account number	
Name and Address Bridgepointe Psychological 8806 Cincinnati Dayton Road West Chester, OH 45069	On which entry in Part 1 or Part 2 did y Line 4.12 of (Check one): Last 4 digits of account number	rou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	-	
Name and Address CashNet USA PO Box 5230 Chicago, IL 60606-0230	On which entry in Part 1 or Part 2 did y Line 4.13 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Cashnet USA PO Box 643990 IN 46264	On which entry in Part 1 or Part 2 did y Line 4.13 of (Check one): Last 4 digits of account number	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	-	continue the entire of energiate of
Name and Address Cincinnati Bell P.O. Box 748001 Cincinnati, OH 45274-8001	On which entry in Part 1 or Part 2 did y Line 4.6 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Cincinnati Bell c/o Bankruptcy Dept. 221 E. 4th Street ML 121-800 Cincinnati, OH 45202	On which entry in Part 1 or Part 2 did y Line 4.6 of (<i>Check one</i>):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Cincillati, Ori 45202	Last 4 digits of account number	
Name and Address Cincinnati Children's Hospital PO Box 640242 Cincinnati, OH 45264-0242	On which entry in Part 1 or Part 2 did y Line 4.3 of (Check one): Last 4 digits of account number	vou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Collection Services Two Wells Avenue Newton, MA 02459	On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Newton, MA 02400	Last 4 digits of account number	
Name and Address Doctors Urgent Care 10079 Springfield Cincinnati, OH 45215	On which entry in Part 1 or Part 2 did y Line 4.1 of (<i>Check one</i>):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Doctors Urgent Care PO Box 40304 Cincinnati, OH 45240	On which entry in Part 1 or Part 2 did y Line 4.1 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address ERC 8014 Bayberry Road Jacksonville, FL 32256	On which entry in Part 1 or Part 2 did y Line 4.6 of (Check one):	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Fabco	On which entry in Part 1 or Part 2 did y Line 4.7 of (<i>Check one</i>):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 25 of 53

Debtor 1 Stephanie Michelle Deaton	Case number (if known)
4640 Executive Drive Columbus, OH 43220	■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Geico PO Box 97032 Washington, DC 20090-7032	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Geico One Geico Center Macon, GA 31296	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Key Bridge PO Box 1566 Lima, OH 45802-1568	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address MaternOhio Clinical Associates 5150 Bradenton Avenue A Dublin, OH 43017	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Mercy Health PO BOX 630804 Cincinnati, OH 45263	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Nissan Motor Acceptance Corporation PO Box 0502 Carol Stream, IL 60132-0502	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address OneMain Financial 100 International Drive 15th Floor Baltimore, MD 21202	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Progressive PO Box 182009 Columbus, OH 43218	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Progressive 256 W. Data Drive Draper, UT 84020	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Republic Bank and Trust PO Box 950276 Louisville, KY 40295	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Speedy Cash c/o AD Astra Recovery Services PO Box 101928 Dept 1911	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 26 of 53

Debtor 1 Stephanie Michelle Deaton		Case number (if known)
Birmingham, AL 35210		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Speedy Cash	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 101928, Dept. 2280 Birmingham, AL 35210		■ Part 2: Creditors with Nonpriority Unsecured Claims
Birmingham, AL 33210	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 or	lid you list the original creditor?
US Department of Education	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
3130 Fairview Park Drive		■ Part 2: Creditors with Nonpriority Unsecured Claims
Suite 800 Falls Church, VA 23323		
i alia Ciluicii, VA 23323	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 15,373.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
		you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 40,324.40
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 55,697.40

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 27 of 53

Fill in this infor	rmation to identify your	case:	V	
Debtor 1	Stephanie Michel	lle Deaton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 28 of 53

		Docume	nı Page 28 0	1 53	
Fill in thi	s information to identify your	case:			
Dobtor 1	Ctanhania Miaha	lle Destan			
Debtor 1	Stephanie Miche	Middle Name	Last Name		
Debtor 2	. not realine	madio Hamo	Zaot Hamo		
(Spouse if, fi	First Name	Middle Name	Last Name		
		0011711501101070107	05 01110		
United St	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case nun	nher				
(if known)				☐ Check if this is a	n
				amended filing	
Officia	al Form 106H				
		lahtara			
<u>Scne</u>	dule H: Your Cod	eptors		1	2/15
·					
	e and case number (if known by you have any codebtors? (If			as a codebtor.	
■ No					
□ Ye	es				
	thin the last 8 years, have you na, California, Idaho, Louisiana			y? (Community property states and territories includ ngton, and Wisconsin.)	е
■ No	o. Go to line 3.				
	es. Did your spouse, former spo	use or legal equivalent live	e with you at the time?		
	s. Dia your spouse, former spo	acc, or logar equivalent live	with you at the time.		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person sure you have listed the creditor on Schedule D (6G). Use Schedule D, Schedule E/F, or Schedule	(Official
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the	a daht
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	, acst
				,	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Newstern			_	
	Number Street City	State	ZIP Code		
	S.,	Ciaio	2 0000		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 29 of 53

Fill	in this information to identify your c	ase:								
Del	otor 1 Stephanie N	lichelle Deaton								
	otor 2				_					
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO							
	se number nown)		-			☐ A su	mended fil pplement s	showing _l	postpetition chapter owing date:	
0	fficial Form 106I					MM	/ DD/ YYY	Y		
S	chedule I: Your Inc	ome							12/1	5
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sith you, do not include	spouse de infor	is liv matio	ing with you	u, include our spouse	informa e. If more	tion about your e space is needed,	
1.	Fill in your employment information.		Debtor 1			De	ebtor 2 or	non-filin	ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				Employed			
	employers.	Occupation	Pharmacy Tech	(\$20.0	n x 4	10)				
	Include part-time, seasonal, or self-employed work.	Employer's name	Humana	(420.0						_
	Occupation may include student or homemaker, if it applies.	Employer's address	111 Merchant St Cincinnati, OH 4							
		How long employed t	here? 1 month	1						
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any I	line, write \$0) in the spa	ice. Inclu	de your non-filing	
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for tha	t person o	n the line	s below. If you need	i
						For Debto		or Debto	or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,46	6.66 \$	i	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00 +	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

3,466.66

N/A

Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Stephanie Mich	helle Deaton	_		Case	number (if k	nown)				
							r Debtor 1		nor	Debtor	pouse	
	Сор	y line 4 here		4.	•	\$_	3,46	6.66	\$_		N/A	=
5.	List	all payroll deduct	tions:									
	5a.	Tax, Medicare,	and Social Security deductions	5	a.	\$_		0.54	\$_		N/A	_
	5b.	•	tributions for retirement plans		b.	\$_		0.00	\$_		N/A	_
	5c.	•	ributions for retirement plans		C.	\$_		7.34	\$ _		N/A	_
	5d. 5e.	Insurance	ments of retirement fund loans		d. e.	\$_ \$		0.00 3.70	\$_ \$		N/A N/A	_
	5f.	Domestic supp	ort obligations	5f		\$		0.00	\$-		N/A	_
	5g.	Union dues		5		\$_		0.00	\$_		N/A	_
	5h.	Other deduction	ns. Specify: HSA		h.+	\$	16	2.50	+ \$		N/A	_
6.	Add	the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,29	4.08	\$		N/A	=
7.	Cald	culate total month	lly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,17	2.58	\$_		N/A	_
8.	List 8a.	Net income from profession, or factor a statement	ent for each property and business showing gross y and necessary business expenses, and the total	8:	a.	\$		0.00	\$		N/A	
	8b.	Interest and div			b.	\$_		0.00	\$_		N/A	_
	8c.	regularly receiv Include alimony,	payments that you, a non-filing spouse, or a dependent re spousal support, child support, maintenance, divorce property settlement.		C.	\$	33 [.]	1.50	\$		N/A	_
	8d.	Unemployment	compensation	80	d.	\$		0.00	\$		N/A	_
	8e.	Social Security		86	e.	\$_		0.00	\$_		N/A	_
	8f.	Include cash ass that you receive,	ent assistance that you regularly receive sistance and the value (if known) of any non-cash assistance such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.	e 81	f.	\$	(0.00	\$		N/A	
	8g.	Pension or retir		8		\$_		0.00	\$		N/A	_
	8h.	Other monthly i	income. Specify: 401K added back	_ 81	h.+	\$_	27	7.34	+ \$_		N/A	_
9.	Add	l all other income.	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	608	8.84	\$_		N/A	A
10	Calc	culate monthly inc	come. Add line 7 + line 9.	10.	\$		2,781.42	+ \$		N/A	= \$	2,781.42
		-	10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		2,701.42			177		2,701.42
11.	Inclu othe	ude contributions from triends or relative not include any amo	r contributions to the expenses that you list in Schedule om an unmarried partner, members of your household, your es. ounts already included in lines 2-10 or amounts that are not	dep					•		∍ J. +\$	0.00
12.		e that amount on th	e last column of line 10 to the amount in line 11. The res ne Summary of Schedules and Statistical Summary of Certain							12.	\$	2,781.42
13.	Do y	you expect an incl No.	rease or decrease within the year after you file this form	?							Combine month!	ned y income
		Yes. Explain:	A. Child Support: Between approximatelty 11-20 \$1080.93 in child support. That total amount was 10-2019 to present. Form 22 Child Support = \$72 B. Debtor was divorced in 2009, and she is owed	5.00	id I O. N	betw /lont	veen :hly Ordei	r is \$3	31.50		total su	ım of

Official Form 106l Schedule I: Your Income page 2

						ı		
Fill	in this informa	tion to identify yo	our case:					
Deb	tor 1	Stephanie M	lichelle D	eaton		Checl	c if this is:	
Dah	tor O					_	An amended filing	
1	otor 2 ouse, if filing)					_		ving postpetition chapter the following date:
``						_	•	
Unit	ed States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF OHIC)	ľ	MM / DD / YYYY	
Cas	e number							
(If kı	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Exper	ises				12/15
				. If two married people a	re filing together, b	oth are equa	Ily responsible fo	
info	ormation. If m	ore space is ne	eded, atta	ch another sheet to this				
nun	nber (it know	n). Answer eve	ry questio	n.				
Par		ibe Your House	ehold					
1.	Is this a joir							
	No. Go to		_					
			ın a separ	ate household?				
			- (C) - O(C -	-15 10010 5 ···			0	
	□ Y	es. Debtor 2 mus	st file Offic	al Form 106J-2, Expenses	s for Separate House	enola of Debto	or 2.	
2.	Do you have	e dependents?	☐ No					
	Do not list D	ebtor 1 and	Yes.	Fill out this information for	Dependent's relat		Dependent's	Does dependent
	Debtor 2.			each dependent	Debtor 1 or Debto	r 2	age	live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		17	Yes
								□ No
								□ Yes □ No
								☐ Yes
					-			□ No
								☐ Yes
3.		enses include	_	No				
		f people other t d your depende		Yes				
	<u> </u>							
Par		ate Your Ongoi		ly Expenses uptcy filing date unless y	ou are using this f	orm as a sur	nloment in a Cha	enter 12 case to report
				y is filed. If this is a supp				
app	olicable date.							
Incl	lude expense	s paid for with	non-cash	government assistance i	if you know			
the	value of such	n assistance an		cluded it on Schedule I:			Your exp	ansas
(Off	ficial Form 10	61.)					Tour exp	CIISCS
4.	The rental of	r home owners	hip exper	ses for your residence.	nclude first mortgage	e		
		nd any rent for th			gag	4. \$		870.00
	If not includ	led in line 4:						
		estate taxes	o or ronto	's incurance		4a. \$		0.00
	•	rty, homeowner's maintenance, re	-	s insurance upkeep expenses		4b. \$ 4c. \$		0.00 15.00
		owner's associa				4d. \$		0.00
5.	Additional r	nortgage paym	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 32 of 53

Deb	tor 1 Stephanie Michelle Deaton	Case num	ber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection	6b.	*	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	· :	0.00
	6d. Other. Specify: Internet	6d.	*	77.00
7.	Food and housekeeping supplies	7.	\$	495.00
8.	Childcare and children's education costs	8.	·	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	120.00
10.		10.	· -	75.00
-	Medical and dental expenses	11.	·	0.00
	Transportation. Include gas, maintenance, bus or train fare.		Ψ	0.00
12.	Do not include car payments.	12.	\$	175.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	90.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	·	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: Anticipated auto payment (See below)	17c.	\$	350.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as	10	¢.	0.00
40	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
19.	Other payments you make to support others who do not live with you.	40	\$	0.00
20	Specify: Other real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>	19.	aur Incomo	
20.	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20a. 20b.	· ·	
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	·	0.00
	• • •	20d.	·	0.00
	20d. Maintenance, repair, and upkeep expenses20e. Homeowner's association or condominium dues	20u. 20e.	*	0.00
04			·	0.00
۷۱.	Other: Specify: Cell phone	21.	+\$	95.00
	Cat		+\$	25.00
	Daughter's education costs (See below)		+\$	216.67
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,853.67
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$, , , , , , , , , , , , , , , , , , , ,
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,853.67
	, , ,		Ψ	2,033.07
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,781.42
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,853.67
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	-72.25
	The result is your monthly net income.	230.		1 2.20

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes.

Explain here: A. Debtor is currently/temporarily borrowing her sister's car. She plan to finance the purchase of an automobile after case filing (to replace the vehicle repossessed in 7-2019).

B. Debtor's daughter attends GED classes at least once per week. Average transportation costs (Lyft) are \$50.00 per day. This Schedule accounts for the minimum of one day per week.

C. This budget does not account for application of tax refund proceeds.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 33 of 53

Fill in this info	rmation to identify your	case:			
Debtor 1	Stephanie Michel	le Deaton			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					
(if known)					
1					amended filing
Official For			Dalatania Oa		
Declara	tion About a	an Individual	Debtor's Sc	chedules	12/15
Sig	gn Below				
Did you pa	ay or agree to pay some	eone who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, nature (Official Form 119)
				Declaration, and oign	atare (Official Form 113)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	
X /s/ Ste	ephanie Michelle Deat	ton	X		
	anie Michelle Deaton		Signature of	Debtor 2	
Signatu	ure of Debtor 1				
Date	November 25, 2019		Date		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 34 of 53

Fill in	this inform	ation to identify you	r case:			
Debte		Stephanie Miche				
Dobi	J1 1	First Name	Middle Name	Last Name		
Debte (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
		kruptcy Court for the:	SOUTHERN DISTRICT C	OF OHIO		
Cooo	number					
(if know					_	heck if this is an mended filing
Oπ:	aial Eas	···· 407				
	cial For tement		Affairs for Individ	duals Filing for B	ankruptcy	4/19
					equally responsible for sup	
numb	er (if known). Answer every ques	stion.			
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. V	Vhat is your	current marital statu	is?			
[☐ Married ■ Not marr	ied				
2. [Ouring the la	st 3 years, have you	lived anywhere other than	where you live now?		
ı	No					
[_	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory	
	■ Na	,	, ,	,	, , , , , , , , , , , , , , , , , , ,	,
	■ No □ Yes. Mal	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Ot	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
ı art	Explair	Time Cources of Tou	i income			
F	ill in the tota	l amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
[□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,281.41	☐ Wages, commissions, bonuses, tips	,
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debt	or 1			ok-14326 chelle Dea	Documen	nt Page 35 of 53	L/30/19 23:22:44 L	Desc Main		
					Debtor 1		Debtor 2			
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
For last calendar year: (January 1 to December 31, 2018)					■ Wages, commissions, bonuses, tips	\$41,470.00	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business	Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2017)					■ Wages, commissions, bonuses, tips	\$44,514.00	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business			
For the calendar year: (January 1 to December 31, 2016)				31, 2016)	■ Wages, commissions, bonuses, tips	\$36,775.00	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business			
ı		each s		ne gross inco		you received together, list it o				
					Debtor 1		Debtor 2			
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
Part	3:	List	Certain Pay	yments You	Made Before You Filed for	Bankruptcy				
3	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.									
		Yes.			r both have primarily consure you filed for bankruptcy, di	umer debts. id you pay any creditor a total	of \$600 or more?			

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

No.

Go to line 7.

attorney for this bankruptcy case.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 36 of 53

Debtor 1		Stephanie Michelle Deaton	Case number (if known)									
7.	Insider of whice a busin	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one fo a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.										
	■ N	o es. List all payments to an insider.										
	Insider's Name and Address		Dates of payment		Total amount paid	Amount you still owe	Reason for t	for this payment				
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.											
	■ N	0										
	□ Y	es. List all payments to an insider										
	Inside	er's Name and Address	Dates	of payment	Total amount paid	Amount you still owe	Reason for t	this payment tor's name				
Par	t 4:	Identify Legal Actions, Repossession	ns. and I	-oreclosures								
	modific	such matters, including personal injury cations, and contract disputes. o es. Fill in the details.	/ cases, s	mall claims action	ns, divorces, collectic	on suits, paternity a	actions, support	or custody				
	Case Case	title number	Natur	e of the case	Court or agency	•	Status of the	e case				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.											
		es. Fill in the information below. tor Name and Address	Decer	ibe the Property		Date		Value of the				
	Creur	tor Name and Address		in what happens		Date		property				
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?											
	■ N											
		es. Fill in the details. tor Name and Address	Descr	ibe the action th	e creditor took		action was	Amount				
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?											
	■ N	0										
	□ Y	es										
Par	t 5:	List Certain Gifts and Contributions										
13.	_	2 years before you filed for bankrup	otcy, did	you give any gif	ts with a total value	of more than \$6	00 per person?					
	■ N	o es. Fill in the details for each gift.										
		with a total value of more than \$600	C	escribe the gifts	S	Date the g	es you gave	Value				
		on to Whom You Gave the Gift and				0						

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 37 of 53

Case number (if known)

14.	Within 2 years before you filed for bankruptcy	, did you give any gifts or contribution	s with a total	value of more than	\$600 to any charity?
	No Yes. Fill in the details for each gift or contrib	ution			
	☐ Yes. Fill in the details for each gift or contrib Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what you contributed		Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Code)				
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did y	ou lose anyth	ing because of thef	t, fire, other disaster
	■ No				
	☐ Yes. Fill in the details.				
	how the loss occurred Inclu	cribe any insurance coverage for the lo de the amount that insurance has paid. L	ist pending	Date of your loss	Value of property lost
	insur	ance claims on line 33 of Schedule A/B:	Property.		
Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar Include any attorneys, bankruptcy petition prepar	ring a bankruptcy petition?			rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Steiden Law Offices	Legal fees: \$750.00		10-8-2019	\$750.00
	411 Madison Avenue	20ga: 1000.			4.00.00
	Covington, KY 41011 esteiden@steidenlaw.com				
	esteiden@steidemaw.com				
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I	or to make payments to your creditors		rtransfer any propei	rty to anyone who
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already	iness or financial affairs? e as security (such as the granting of a se			
	■ No □ Yes. Fill in the details.				
	Person Who Received Transfer	Description and value of	Describe a	ny property or	Date transfer was
	Address	property transferred		received or debts	made
	Person's relationship to you				

Debtor 1 Stephanie Michelle Deaton

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 38 of 53

Debtor 1 Stephanie Michelle Deaton

Case number (if known)

19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote No □ Yes. Fill in the details.		y property to a	a self-settle	d trust or similar device	of which you are a
	Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made
	t 8: List of Certain Financial Accounts, Instr Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	•	·	•		our benefit, closed,
	Include checking, savings, money market, or or houses, pension funds, cooperatives, associated No Yes. Fill in the details.				t; shares in banks, credi	t unions, brokerage
		ast 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ıny safe de _l	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within	1 year befor	re you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	19: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any prope	rty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these states.	air, land, soil, surface	water, groun			
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	-	environmental	law, wheth	er you now own, operate	e, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardou	s waste, ha	zardous substance, toxi	c substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 39 of 53

Debtor 1 Stephanie Michelle Deaton

Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Hav	re you notified any governmental unit of	any release of hazardous material?			
		No				
		Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Hav	re you been a party in any judicial or adm	ninistrative proceeding under any en	viron	nmental law? Include settlements a	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrupte	cy, did you own a business or have a	any o	of the following connections to any	business?
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activit	y, eitl	her full-time or part-time	
		☐ A member of a limited liability compa	any (LLC) or limited liability partners	ship (LLP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing exe	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporatio	n		
		No. None of the above applies. Go to P	Part 12.			
		Yes. Check all that apply above and fill	in the details below for each busine	SS.		
	Bu	siness Name	Describe the nature of the business	S	Employer Identification number	
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	r	Do not include Social Security in Dates business existed	number or ITIN.
28.		hin 2 years before you filed for bankrupto citutions, creditors, or other parties.	cy, did you give a financial statemen	t to a	nyone about your business? Inclu	ide all financial
		No Yes. Fill in the details below.				
	_	me	Date Issued			
	Ad	dress mber, Street, City, State and ZIP Code)				

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 40 of 53

Debtor 1	Stephanie Michelle Deaton		Case number (if known)
Part 12:	Sign Below		
are true with a ba	and correct. I understand that mak	•	ents, and I declare under penalty of perjury that the answers operty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ Step	ohanie Michelle Deaton		
	nnie Michelle Deaton re of Debtor 1	Signature of Debtor 2	
Date	November 25, 2019	Date	
Did you ■ No □ Yes	attach additional pages to Your Sta	atement of Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
Did you	pay or agree to pay someone who	is not an attorney to help you fill out	bankruptcy forms?
■ No	. , , , , , , , , , , , , , , , , , , ,	, , ,	• •

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 41 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In	re Stephanie Michelle Deaton		Case No) .	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	750.00	
	Prior to the filing of this statement I have received			750.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are me	mbers and associates of n	ny law firm.
5.	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the narm. In return for the above-disclosed fee, I have agreed to real. Analysis of the debtor's financial situation, and render be the Preparation and filing of any petition, schedules, stated. Representation of the debtor at the meeting of credited. [Other provisions as needed] exemption planning; review and filing of the debtors in contession of the debtors in contession contession.	ender legal service for all aspectations and confirmation hearing, and reaffirmation agreements and constitution agreements and constitution agreements are does not include the following sted matters, motions on key lien avoidance	ts of the bankruptcy termining whether th may be required; and any adjourned h	ttached. v case, including: o file a petition in bankru earings thereof; and/or defense of mo	ptcy; tions,
	 representation of the debtors in advers recover property, dischargeability action discharge 	sary proceedings of any na ns, objections to discharg	ature, including e, and/or actions	without limitation acti seeking revocation o	ons to of
	Additional attorney fees would apply to				
		CERTIFICATION	2		
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	y agreement or arrangement fo	r payment to me to	representation of the deb	otor(s) in
	November 25, 2019	/s/ Eric A. Steide			_
	Date	Eric A. Steiden, I		8 KY: 88321	
		Signature of Attorn Steiden Law Offi			
		411 Madison Ave	enue		
		Covington, KY 4			
		(513) 888-8888 I esteiden@steide		10	
		Name of law firm	inaw.com		_
		Trance of tare fille			

Fill in this inf	formation to identify your case:		Ch	a ala ana	han anki aa a	in a stand in their farmer are	dia Famo
Debtor 1	Stephanie Michelle Deaton			eck one 2A-1Sup		irected in this form and	ı III FOIIII
Debtor 2	Stephanie Michelle Deaton			■ 1 Th	oro ic no proc	umption of abuse	
(Spouse, if filing					·	·	
United State	s Bankruptcy Court for the: Southern District of	of Ohio	'			o determine if a presunade under <i>Chapter 7</i>	•
Case numbe	er			Ċ	alculation (Off	icial Form 122A-2).	
(if known)						does not apply now by service but it could a	
O((; -; -1	F 400A 4			☐ Che	ck if this is a	n amended filing	
	Form 122A - 1						
Chapte	r 7 Statement of Your Cui	rent Mor	nthly inc	ome)		10/19
attach a separ case number (qualifying mili	te and accurate as possible. If two married people is the sheet to this form. Include the line number to volif known). If you believe that you are exempted frow itary service, complete and file Statement of Exemple Calculate Your Current Monthly Income	hich the additior m a presumption	nal information a of abuse becau	applies. (se you d	On the top of a o not have prir	ny additional pages, wri narily consumer debts o	ite your name and or because of
1. What is	s your marital and filing status? Check one or	ıly.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Mar	ried and your spouse is filing with you. Fill or	ıt both Columns	A and B, lines	2-11.			
☐ Mar	ried and your spouse is NOT filing with you.	You and your s	spouse are:				
	iving in the same household and are not lega	illy separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
ļ r	iving separately or are legally separated. Fill benalty of perjury that you and your spouse are leving apart for reasons that do not include evading.	egally separated	d under nonban	kruptcy	law that applie	es or that you and you	
101(10A). I the 6 mont	average monthly income that you received from all For example, if you are filing on September 15, the 6-mns, add the income for all 6 months and divide the total vn the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throus bult. Do not include	ugh Augu de any ind	st 31. If the amo	ount of your monthly incor ore than once. For examp	me varied during ple, if both
				Columi Debtor		Column B Debtor 2 or non-filing spouse	
_	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	2,890.57	\$	
	ny and maintenance payments. Do not include in B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from ar and roo	ounts from any source which are regularly poor your dependents, including child support a unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	Include regular d, your depende	contributions nts, parents,	\$	120.83	\$	
	come from operating a business, profession,	or farm					
			otor 1				
	receipts (before all deductions)	\$ 0.00					
	ry and necessary operating expenses	-\$ 0.00	Camushana	Φ	0.00	Φ	
	nthly income from a business, profession, or far	m \$	Copy here ->	5	0.00	\$	
6. Net inc	come from rental and other real property	Det	otor 1				
Gross	receipts (before all deductions)	\$ 0.00					
	ry and necessary operating expenses	-\$ 0.00					
	nthly income from rental or other real property	· ———	Copy here ->	\$	0.00	\$	
	t, dividends, and royalties	*		\$	0.00	\$	

Official Form 122A-1

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 43 of 53

Stephanie Michelle Deaton Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 3.011.40 \$ \$ 3,011.40 each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 3,011.40 Multiply by 12 (the number of months in a year) **x** 12 36.136.80 12b. The result is your annual income for this part of the form 12h. 13. Calculate the median family income that applies to you. Follow these steps: OH Fill in the state in which you live. Fill in the number of people in your household. 2 63.514.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14a. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Stephanie Michelle Deaton **Stephanie Michelle Deaton** Signature of Debtor 1 Date November 25, 2019

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 44 of 53

Debtor 1	Stephanie Michelle Deaton	Case number (if known)	
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 45 of 53

Debtor 1 Stephanie Michelle Deaton Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2019 to 10/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Mercy Health

Income by Month:

6 Months Ago:	05/2019	\$2,849.01
5 Months Ago:	06/2019	\$2,761.16
4 Months Ago:	07/2019	\$2,710.27
3 Months Ago:	08/2019	\$2,899.90
2 Months Ago:	09/2019	\$3,084.10
Last Month:	10/2019	\$3,038.97
	Average per month:	\$2,890.57

Line 4 - Child support income (including foster care and disability)

Source of Income: Child Support

Income by Month:

6 Months Ago:	05/2019	\$0.00
5 Months Ago:	06/2019	\$0.00
4 Months Ago:	07/2019	\$0.00
3 Months Ago:	08/2019	\$0.00
2 Months Ago:	09/2019	\$0.00
Last Month:	10/2019	\$725.00
	Average per month:	\$120.83

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Accelerated Creditors Serv. 10079 Springfield Pike Cincinnati, OH 45215-1454

Accelerated Creditors Services, Inc. 10079 Springfield Pike PO Box 40304 Cincinnati, OH 45215

AD Astra Recovery Services, Inc. 7330 W 33rd Street N Suite 118 Wichita, KS 67205

Bridgepointe Psychological 8806 Cincinnati Dayton Road West Chester, OH 45069

CashNet USA PO Box 5230 Chicago, IL 60606-0230

Cashnet USA PO Box 643990 IN 46264

Cincinnati Bell P.O. Box 748001 Cincinnati, OH 45274-8001

Cincinnati Bell c/o Bankruptcy Dept. 221 E. 4th Street ML 121-800 Cincinnati, OH 45202

Cincinnati Children's Hospital PO Box 5209 Cincinnati, OH 45201-5209

Cincinnati Children's Hospital PO Box 640242 Cincinnati, OH 45264-0242

Credit Collection Services 725 Canton Street Norwood, MA 02062

Credit Collection Services Two Wells Avenue Newton, MA 02459

Department of Education/Nelnet 121 S 13th Street Lincoln, NE 68508 Doctors Urgent Care 10079 Springfield Cincinnati, OH 45215

Doctors Urgent Care PO Box 40304 Cincinnati, OH 45240

ERC PO Box 57610 Jacksonville, FL 32241

ERC 8014 Bayberry Road Jacksonville, FL 32256

Fabco PO Box 20850 Columbus, OH 43220

Fabco 4640 Executive Drive Columbus, OH 43220

Geico PO Box 97032 Washington, DC 20090-7032

Geico One Geico Center Macon, GA 31296

Key Bridge 2348 Baton Rouge Avenue PO Box 1568 Lima, OH 45805

Key Bridge
PO Box 1566
Lima, OH 45802-1568

MaternOhio Clinical Associates 5150 Bradenton Avenue A Dublin, OH 43017

Mercy Health PO box 635963 Cincinnati, OH 45263

Mercy Health PO BOX 630804 Cincinnati, OH 45263 Nissan Motor Acceptance Corporation PO Box 660360 Dallas, TX 75266

Nissan Motor Acceptance Corporation PO Box 0502 Carol Stream, IL 60132-0502

OneMain Financial PO Box 64 Evansville, IN 47701

OneMain Financial 100 International Drive 15th Floor Baltimore, MD 21202

Parson Bishop 7870 Camargo Rd Cincinnati, OH 45243

Plaza Services 110 Hammond Drive Atlanta, GA 30328

Progressive PO Box 182009 Columbus, OH 43218

Progressive 256 W. Data Drive Draper, UT 84020

Republic Bank and Trust PO Box 701211 Louisville, KY 40270

Republic Bank and Trust PO Box 950276 Louisville, KY 40295

Safe FCU Visa PO Box 2008 Sumter, SC 29151

Speedy Cash c/o AD Astra Recovery Services PO Box 101928 Dept 1911 Birmingham, AL 35210

Speedy Cash PO Box 101928, Dept. 2280 Birmingham, AL 35210

Case 1:19-bk-14326 Doc 1 Filed 11/30/19 Entered 11/30/19 23:22:44 Desc Main Document Page 53 of 53

The Receivable Management Services LLC 240 Emery Street Bethlehem, PA 18015

US Department of Education 3130 Fairview Park Drive Suite 800 Falls Church, VA 23323